IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
INFORMATION DISCLOSURE STATEMENT

APPLICANTS:

Schmidhammer et al.

CONFIRMATION NO.:9244

SERIAL NO.:

10/826,089

GROUP ART UNIT: 2817

FILED:

. in t. ...

April 16, 2004

TITLE:

"DUPLEXER WITH EXTENDED FUNCTIONALITY"

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

SIR:

In accordance with the provisions of 37 C.F.R. § 1.56, Applicants request that citation and examination of the following document be made during the course of examination of the above-referenced application for United States Letters Patent.

AT United States Patent Application Publication No. 2003/0060170

EXPLANATION OF RELEVANCE

Reference AT was identified and discussed at page 2 of the present specification and Applicants stand by the statements in the specification concerning the teachings of this reference.

A copy of Reference AU together with Form 1449 is submitted herewith.

As of the date of mailing of this Information Disclosure Statement, a first Office Action on the merits has not been received in connection with this application, and therefore, this Information Disclosure Statement is in compliance with 37 C.F.R. §1.97(b)(3), and no fee is necessary.

All claims of the application are submitted to be patentable over the teachings of this reference. Early consideration of the application is therefore respectfully requested.

Submitted by,

(Reg. 24,149)

Schiff, Hardin LLP
CUSTOMER NO. 26574
Patent Department

6600 Sears Tower 233 South Wacker Drive Chicago, Illinois 60606 Telephone: 312/258-5781

Attorneys for Applicants.

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on August 17, 2004.

JAMES D. HOBART

CH1\ 4173425.1

	Docket No.			Serial No.	
	P04,0043 10/826,089 Applicants			0,089	
		nmidhammer et al.			
	Filing D		Art Unit		
	April 16		2817		
UMENTS	· · · · · · · · · · · · · · · · · · ·				
Name	Class	Subclass	Filing Date If appropriate		
	1		1		
	1				
	1				
	1				
	1		†		
	1		1		
	1				
					
OCUMENTS	 S		<u></u>		
Document Number Date Country Cla	T	ass Subclass	Translation		
Country	Class		Yes	No	
			1		
	†				
	1				
	1				
	+				
	+				
	 				
	+				
Title, Date, P	ertinent Pa	ages. Etc.)	1		
cation No. 20					
				not citation is in conformance with MPE considered. Include copy of this form wit	

communication to applicant.